



Hi-Tech Software, Inc. ■ *Uniquely Focused on Long Term Care*

Hi-Tech Moves to New Office Building

Hi-Tech Software has a new mailing and street address:

Mailing address:

PO Box 2150

Skowhegan, ME 04976

Street address:

114 East Madison Road

Madison, ME 04950

Our phone number, email addresses and website URL remain the same.

The new office will accommodate more staff and new technology. Our conference room features a classroom design with a new projector and 100-inch screen, and you can use your Hi-Q Points to schedule training in this new space.

You can review the construction progress and see the nearly “finished product” on our blog at <http://hitechsoftware.wordpress.com/>.

Are you Still Receiving the *Hi-Tech Hi-Five*?

In February we began to send our monthly *Hi-Tech Hi-Five* in a new format via the Constant Contact email marketing service. In March and April we also sent the *HTS Express Extra* in this format.

If you did not receive or recognize these publications, please access them at www.Hi-TechSoftware.com > Hi-Fives > [2011 Hi-Tech Hi-Fives](#) and view the following in your web browser:

- *The Hi-Tech Hi-Five: Five Features that Make Your Job Easier.*
- *HTS Express Extra: News We Cannot Wait to Share.*

When you receive these publications via email, we assure you that it is **safe** to right-click and download the pictures.

To be added to our *Hi-Five* and *HTS Express* mailing list, send your name, facility name and email address to Joanne@Hi-TechSoftware.com.

Bill Spack Joins Hi-Tech

In our March *HTS Express Extra: News We Cannot Wait to Share*, we announced that Bill Spack has joined Hi-Tech as a Software Developer. Learn more about Bill at www.hi-techsoftware.com/about-us/staff/spack.

A recent AHCA analysis found that long term care is the nation's 10th-largest employer, supporting 3.7 percent of the nation's economic activity, contributing to 5.4 million jobs, and accounting for \$205 billion in total labor income.

April 2011



Dates to Remember

Mother's Day, Sunday, May 8

National Nursing Home Week,
May 8–14

Memorial Day,
Monday, May 30. HTS Closed

Father's Day, Sunday, June 19

First Day of Summer,
Tuesday, June 21

Independence Day,
Monday, July 4. HTS Closed

In this Issue

| | |
|---|------|
| News Clients Happy Thoughts Health Care Associations | 2- 3 |
| Clinical News Electronic CAA Resources MDS 3.0 Crossword | 4-5 |
| Financial News New Features Billing News | 6-7 |

Find the **Blue Swoosh**

hiding in this issue, then email marti@hi-techsoftware.com and tell her where you found it. She will enter the first 10 responders in a drawing for a \$25 L.L. Bean gift certificate.

Hi-Tech Welcomes New Clients, New States

Friends and Family and
Lifestyles Integrated Care Associates
Idaho Falls, ID

*Clinical Records for Nursing Care,
Resident Trust Accounting,
Resident Referral, Human Resources*



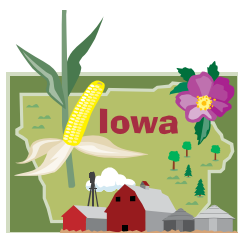
Berkeley Retirement
Home and Nursing Center
Lawrence, MA

*Clinical Records for
Nursing Care,
Resident Trust Accounting,
Resident Referral*



Goldenrod Manor
Clarinda, IA

*Clinical Records for Nursing Care,
Resident Referral,
Resident Accounting,
Resident Trust Accounting,
Payroll with TimeTrak,
Human Resources, General
Ledger, Accounts Payable*



We also Welcome New Maine Clients

Treats Falls House, Orono, ME

*Resident Accounting, Resident Trust Accounting,
Human Resources, Payroll with TimeTrak Interface,
Clinical Records for Residential Care with
CareTracker Interface*

Patten Pond, Surry, ME

*Clinical Records for Residential Care,
UB04 Exception Billing, Resident Trust Accounting,
Resident Referral*

Current Clients Add Capability

IMAR Electronic Medication Administration

Gilbert Manor, Gardiner, ME
Berwick Estates, South Berwick, ME

CareTracker Interface
Coastal Manor, Yarmouth, ME

*Resident Accounting, Resident Trust Accounting,
General Ledger, Accounts Payable, Payroll, TimeTrak
interface, Human Resources*

Auburn Residential Care Center, Auburn, ME ■

Happy Thoughts on Client Support

| GoToAssist Satisfaction Rates | Positive 😊 | Neutral 😐 | Negative 😞 |
|----------------------------------|---------------|--------------|---------------|
| January-March 2011 | 96.8 | 3.2 | 0.0 |

We love to share the compliments that we receive:

Alicia was very helpful and answered all my questions.
I don't know how this experience could have been better.

Thank you, *Deanne*! You were very efficient in assisting me with my problem! Love Hi-Tech's customer service! They are the best people to work with!!

Don't ever let *Connie* leave this company—she is a gold mine of information and help. Thanks Connie.
BETTER THAN EXCELLENT!

Rachael is always a pleasure to work with.

Ed was very professional and made me feel at ease with his knowledge. Thank you!

Jeff is awesome!! He corrected the problem so I could continue with my work.

Kris was very informative and patient. [He let me know] that I can call for assistance in the future.

[I] always feel like I do not have to worry as it will be right when the tech is finished! It always is! ■

Help Hi-Tech Help You

- When you email or leave a voice mail, include the name of your facility.
- When you fax us something, call or email to let us know. We will enter the request into our call queue.
- We assign a Call ID# to each request for support. Provide us with this Call ID# if you fax something or call back about this same support issue.
- When you schedule a visit from your IT staff or hardware technician for an issue that involves Hi-Tech, please call Hi-Tech at least one day before they arrive so Hi-Tech Support can be available if the technician needs assistance.
- Email Support@Hi-TechSoftware.com rather than an individual. Several people will receive your request for assistance, and respond as soon as possible. ■

Hi-Tech to Exhibit at MHCA Leadership Symposium

Hi-Tech will exhibit at the Maine Health Care Association (MHCA) Leadership Symposium on June 7-9 at Point Lookout in Northport, Maine.

The objective of this event is to assist providers in developing and implementing marketing strategies for their facilities.

On Tuesday, June 7 at 9:30, Hi-Tech will sponsor the session *Effective Leadership Enhances Satisfaction, Outcomes, and Financials*, to be presented by Susan Gilster, PhD, FACHCA.

For more information, contact the MHCA at (207) 623-1146 or email Karen Michaud at kmichaud@mehca.org. ■

Hi-Tech to Exhibit at Annual Conferences

Hi-Tech Software representatives always enjoy talking with our clients at the state Health Care Association annual conventions. Here is the 2011 schedule:

Indiana Health Care Association (IHCA)

May 10-12, Indianapolis, IN

New Hampshire Health Care Association (NHHCA)

September 15, Manchester, NH

Maine Health Care Association (MHCA):

October 11-13, Rockland, ME

Vermont Health Care Association (VHCA)

October 17-18, Killington, VT

New Hampshire Association of Residential Care Homes (NHARCH): October 26-27 ■

Creative Imaging Sets Group Run Dates

| Order closes | Delivery |
|--------------|------------|
| June 1 | July 14 |
| September 1 | October 14 |
| December 1 | January 14 |
| March 1 | April 14 |

Contact Dana Wildes: dwildes@creative-ig.com
207-807-6284 (cell) or toll free: 866-370-2999.

For more information: www.hi-techsoftware.com > About Us > Partners > Creative Imaging Cooperative Buying Plan. ■

AHCA to Observe *National Nursing Home Week*

The American Health Care Association (AHCA) observes *National Nursing Home Week* (NNHW) from May 8 (Mother's Day) through May 14. The theme this year is *Fulfilling the Promise*. Find more information at www.NNHW.org.

Other Health Care Observances

May 1-7: *National Hug Holiday Week*
www.hugs4health.org

May 6-12: *National Nurses Day and Week*
www.nursingworld.org

May 12: *Florence Nightingale's Birthdate* (1820-1910)

May 25: *National Senior Health and Fitness Day*
www.fitnessday.com

June 15-22: *Nursing Assistants Day and Week*
www.cna-network.org

Learn about additional events related to health care and long term care at www.ahcancal.org/events/Documents/HealthCareObservances.pdf ■

Review our Webinar Schedule

View upcoming Webinars at www.Hi-TechSoftware.com > **What's Happening**.

We send invitations within two weeks of a Webinar date. If you do not receive an invitation, request one at Webinars@Hi-TechSoftware.com.

If you would like to be added to the mailing list for all Webinars on a particular application, provide your email address, name, facility name and the Hi-Tech applications that you use.

We post the length of our Webinars to assist you in adding them to your work schedule. We apologize if they run longer than intended. A large number of participants, and the number and type of questions asked could cause the Webinar to run longer than the scheduled time. ■

Hi-Tech Posts Webinar Instructions to Website

Hi-Tech sometimes posts Webinar topic instructions to our website at www.Hi-TechSoftware.com > **Clients > Important Instructions**. The presenter will inform you if instructions will be available. ■

Clinical Systems News

Electronic CAA Resource Worksheets Available

The CMS MDS 3.0 RAI User's Manual, Appendix C, provides Care Area Assessment (CAA) Resources you can use to research triggered Care Areas and document your Care Plan decisions for those areas.

Hi-Tech has developed *electronic* versions of the 20 CAA Resource Worksheets. After you complete a resident's MDS and generate the CAA Summary (Section V), you can view, research, edit and print the completed Resource Worksheets.

We have also included a CAA Resources Library which you can edit at **Libraries > MDS / Care Plans > CAA Resources Library**.

Access instructions on the CAA Resource Worksheets from the Hi-Tech Menu. Click **Update Memos** and select ☒ **System Update ...Instructions 11.03**. ■

Access Falls Record in MDS 3.0 and MDS-RCA

Record residents' falls so you can view those records when you complete a resident's MDS record.

First, add a Falls ID record in the Library. Select **Libraries > Documentation > Edit Activities / Events Library**. Assign an ID number to the Fall record. Leave **Length** and **Instructor** blank.

Check either or both of the following:

- ☒ Satisfies MDS Section J-4 a/b (2.0) or J1800 (3.0)
- ☒ Satisfies RCA Section J-7 a/b

When a resident falls, record it through **Documentation > Events > Edit by Resident**. At Activity/Event ID, enter or lookup the Fall ID number. Provide other details about the fall. You can click **Add Note** to add additional details.

In **Edit MDS**, at Section J, item 1800, click **View Falls** to display the recorded falls as of the ARD. If falls are listed, select **1 (Yes)**.

For Maine Residential Care, in **Edit RCA**, click the button **Pull J-7 a/b responses from Activities/Events Detail** to automatically complete items **J7a. Fell in Past 30 Days** and **J7b. Fell In Past 31 -180 Days**. ■

Edit MDS 3.0 BIMS Score when Necessary

In the MDS 3.0, Section C *Brief Interview of Mental Status (BIMS)*, responses C0200 through C0400 are used to calculate a C0500 Summary Score of 00-15. This score is used to determine the RUG group.

At C0500 Summary Score, the **Edit MDS** program will calculate a score of 99 if:

- (a) the resident chose not to participate in the BIMS;
- (b) if four or more items are coded 0 because the resident chose not to answer, or gave an incorrect response, *or*
- (c) if any of the BIMS items are coded with a dash.

A score of 99 may *decrease* the RUG Category for this assessment; therefore, if the resident scores 99 for any of the above reasons, and the answers given are reasonable — even if incorrect — you can add the values of those responses and enter the total at the C0500 Summary Score.

See the RAI Manual, Chapter 3, Section C for more information. ■

MDS Submission Process to Change

Later this year MDS submissions will no longer be transmitted via the AT&T Global Dialer. We are expecting more information from Federal and State agencies, which we will share with IT and hardware support personnel. ■

CMS Issues New MDS 3.0 Regulations

Effective 4/1/2011, CMS regulations indicate that you can no longer *modify* a submitted MDS to change the:

- Reason for Assessment
- Assessment Reference Date (ARD).

Instead, you must *Inactivate* the record and then create and submit a new, correct MDS. You can pull responses from the inactivated MDS into the new MDS.

You can still modify an MDS for other reasons. ■

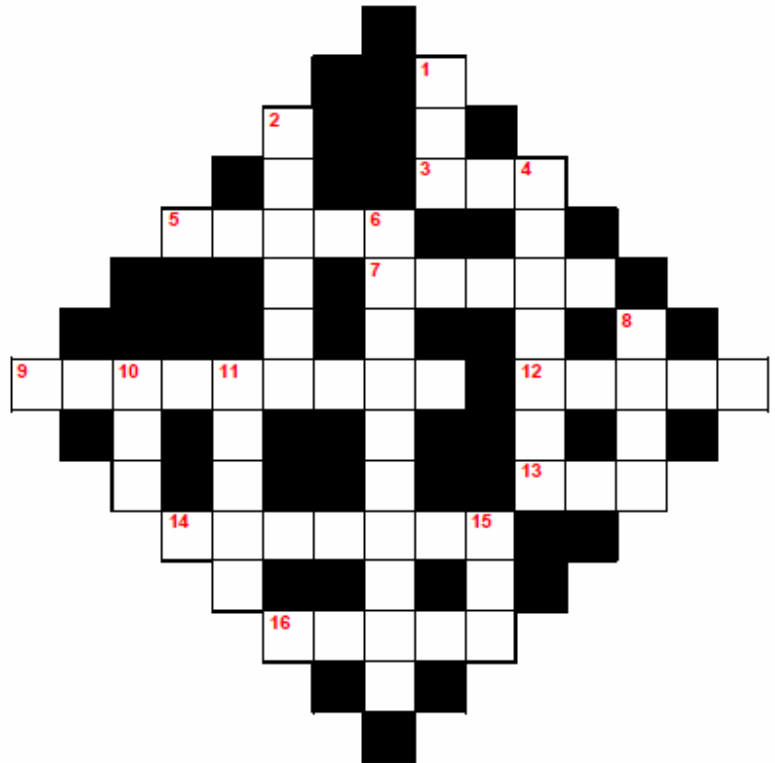
Medical Terminology

ACROSS

3. The part of the alimentary canal between the stomach and the anus. (3)
5. The inner and thicker of the two bones of the human leg between the knee and ankle. (5)
7. Of, in, or relating to the nose. (5)
9. In a lateral direction or location. (9)
12. It's the body's pump. (5)
13. Technically, the part of the superior limb between the shoulder and the elbow but commonly used to refer to the whole superior limb. (3)
14. It is hinged so you can open your mouth. (7)
16. An adjective relating to, or the area near, the ulna. (5)

DOWN

1. It's commonly used to refer to a whole limb, but technically, is only the part between the knee and ankle. (3)
2. The outer and thinner of the two bones of the human leg between the knee and ankle. (6)
4. Membranous tube with cartilaginous rings that conveys inhaled air from the larynx to the bronchi. (7)
6. A gliding joint between the distal ends of the tibia and fibula and the proximal end of the talus. (5,5)
8. The inner surface of the hand from the wrist to the base of the fingers. (4)
10. It's a digit of the foot. (3)
11. Of or relating to the kidneys. (5)
15. The sense organ for hearing and equilibrium. (3)



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CMS to Change the Nursing Home Compare Website

The Centers for Medicare & Medicaid Services (CMS) are scheduled to make the following changes to the Nursing Home Compare website on April 23:

- Provide methods for filing complaints about nursing homes with State Survey Agencies.
- Add a consumer rights section with information on how to take action when rights are violated.
- Put a 6-month "freeze" on current quality measure data and five-star quality measure ratings while data is gathered from the MDS 3.0.

In July 2011, CMS will begin to display information about substantiated complaints that have been received and the number of enforcement actions taken. Read the CMS Memorandum at www.cms.gov/surveycertificationgeninfo/downloads/SCLetter11_17.pdf.



Financial Systems News

Do You Know about these New Features?

Accounts Payable > File Utilities > Void AP Checks will not allow you to void a check if the previous payment process is not complete, preventing potential issues.

Payroll > Payroll Checks > Print Checks: check stubs can now include employees' entire Social Security Numbers or just the last four digits. To make this choice for your facility select **Libraries > Facility > Payroll Profile**. Click Ok button twice. On the right side of the screen under **Other Payroll Features**, check or uncheck **Print Full SSNo on Check Stub**.

Fixed Assets > Fixed Asset Inquiry will allow you to sort by Asset ID or Department for more than 500 assets.

Fixed Assets > Print Depreciation Entry:

- G/L summary will equal the **Update Depreciation** report.
- Department totals will allow for \$99 million.
- Assets to be fully depreciated during the current month will pull the *lesser* of the current monthly depreciation or an amount equal to fully depreciate the asset.
- When you choose to **Include All Assets**, the report will include fully depreciated assets and assets that do not depreciate, i.e. land.

Resident Trust Accounting > End of Quarter > Print Verification Letters will allow you to specify the quarter-end date so the balances in the letters match the quarterly statement balances. ■

When Should You Submit a No-Pay Bill?

Submit a monthly no-pay bill for a Medicare A resident who no longer needs skilled care and remains in a Medicare-certified bed, regardless of any remaining Medicare benefit days left. Use a Type of Bill of 210.

CMS uses the information for national healthcare planning and to track the resident's benefit periods.

Continue to submit No Pay Bills monthly until the resident is moved to a non-skilled unit or is discharged from the facility.

Medicare C (Medicare Advantage) plans do not require No Pay Bills when resident no longer needs skilled care and remains in a Medicare Certified Bed. ■

Maine: Who to Call About MIHMS and MeCMS

Until February 1, 2011, MaineCare had two call centers that handled questions based on dates of claims.

- Claims with dates of service 8/31/2010 and earlier (MeCMS)
- Dates of service 9/1/2010 and later (MIHMS)

As of February 1, only the MIHMS calls center will receive calls at 1-866-690-5585. Contact your provider relations specialist about MeCMS claims.

For more information go to:

www.maine.gov/dhhs/oms/pdfs_doc/news_can_use/call_ctr_summ..pdf. ■

Indiana: No more Bed Hold Days Coverage

Effective February 1, 2011, the Indiana Health Coverage Programs (IHCP) will no longer cover "bed hold" days in a nursing facility (NF) as a member benefit. This includes all revenue codes in the table below for members in provider specialty 030—nursing facility.

| Code | Description |
|------|---------------------------------------|
| 180 | Leave days |
| 183 | For therapeutic purposes |
| 185 | From nursing home for hospitalization |

If you have questions about this bulletin, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

Download a copy of the bulletin from <http://provider.indianamedicaid.com/ihcp/Bulletins/BT201061.pdf>.

Subscribe to the IHCP E-mail Notifications at: http://provider.indianamedicaid.com/ihcp/mailling_list/default.asp. ■

Vaccine Administration Claims Returned

On April 7, NHIC issued a J14 MAC Part A/RHHI Special Message regarding returned claims with a Reason Code 7FLUT when billing the administration of a vaccine without billing for the vaccine itself.

Providers may bill for the administration of a vaccine when the vaccine is supplied at no charge.

NOTE: NHIC is the J14 Medicare Administrative Contractor (MAC) for Maine, Massachusetts, New Hampshire, Vermont and Rhode Island. ■

From HCPro's MDS Central at
<http://blogs.hcpro.com/mdscentral/>

Should the billing office use the diagnosis codes from the MDS on the UB-04?

Q: On Section I of the MDS, I have been putting in codes of diagnoses that are current but not listed on first half of Section I. The billing office asks for a copy of Section I monthly to do their billing. A consultant for billing came in and said that my codes on MDS are incorrect and don't support reason for coverage under Medicare Part A. Shouldn't the billing office be using their own diagnosis codes for the UB-04 instead of mine? I have to go to an ICD-9 coding course now to improve my coding. Should the billing office be that dependent on my coding?

A: As a best practice, you may want to establish a diagnosis list for the resident while in your facility. Then you need to follow the directions for coding Section I of the MDS (and update the diagnosis list as necessary). The UB-04 must be coded in accordance with the coding guidelines for ICD-9-CM as well as support coverage or medical necessity. Those diagnosis codes that are necessary for the UB-04, but not indicated on the MDS 3.0 can be added to the MDS in section I8000. **Additional active diagnoses.** You will want to coordinate the diagnoses on the MDS with those used on the UB-04 and make sure to update with each submission. ■

Hi-Tech Prepares for the 5010 File Format

CMS is transitioning from the 837 billing and 835 remittance file formats to the version 5010 for Medicare and Medicaid.

The transition date is 12/31/2011, and all covered entities must be in compliance by January 1, 2012.

Hi-Tech will provide the new format in a regular update well before the deadline so you can submit test claims and begin live submissions before the compliance date. ■

Corrections to Payments for MPPR Claims

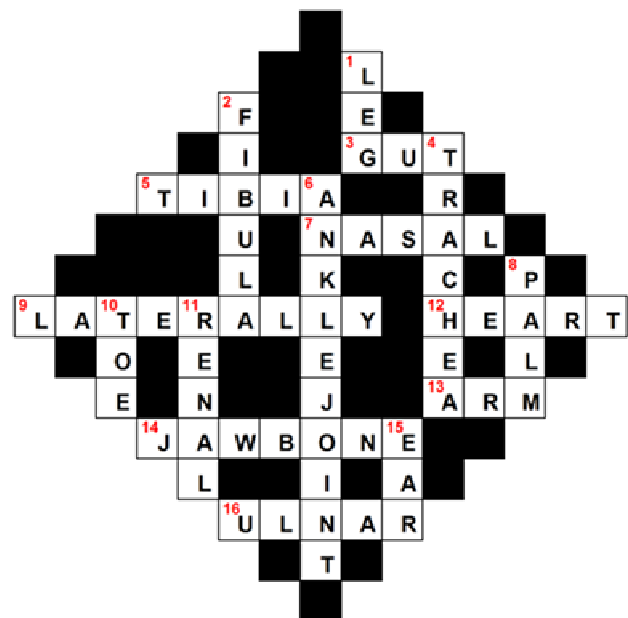
CMS Message 201104-26; JSM/TDL 11220

It has been brought to the attention of the Centers for Medicare & Medicaid Services (CMS) that the Fiscal Intermediary Shared System (FISS) is taking the Multiple Procedure Payment Reduction on claims regardless of whether the services were provided on the same day. As a result of this coding error, any therapy claims with dates of service on or after January 1, 2011, processed from January 3, 2011 through February 6, 2011, with one of the specified therapy codes in Change Request (CR) 7050 were processed incorrectly.

System changes were successfully implemented on **February 7, 2011**, and CMS has instructed Medicare contractors to adjust claims that processed incorrectly.

CMS has also learned that FISS was using a rate file which contains rates that reflect a 20% reduction rather than the 25% reduction that is appropriate for institutional claims. As a result of this error, all therapy services subject to the MPPR with dates of service on or after January 1, 2011, have been paid incorrect amounts.

Medicare contractors will install a corrected rate file in early May, and CMS has instructed Medicare contractors to adjust claims that were paid incorrectly no later than June 30, 2011. ■



HTS Staff

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The *HTS Express*
is published by
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We edit for clarity and space.

April 2011



See previous *HTS Express* and *Hi-Tech Hi-Fives* at
www.Hi-TechSoftware.com > **Hi-Tech Clients** > Newsletters.

Email new support issues to support@Hi-Techsoftware.com.
Include your facility name and phone number.
Several support people receive emails to this address.
If you fax an issue to HTS, call to verify it has been received.
We will log your issue in the order received.



*Nearly 30 Years
Uniquely Focused
on Long Term Care*

Hi-Tech Software
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Skowhegan, ME 04976



If this is not addressed to the correct person, please
notify us so we can correct our mailing list.